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KENTUCKY LEGISLATIVE ETHICS COMMISSION

FEB 15 2005

STATEMENT OF FINANCIAL DISCLOSURE (KRS 6,787)

To be filed by: All members of the General Assembly, all candidates and not	ninees for election to the
General Assembly, and major management personnel in the legislative bran	ch of state government.
	- , ()

☐ Check here and attach additional sheets if necessary Number of sheets attached.
Please Include The Following Information For The Preceding Calendar Year:
Name Brandon D. Smith
Business address Post Office. Box 1479 Mozard, KV 4/702 Business telephone (606) 439-6740
Home address 250 feet w. Blod Uproct KV 41701
Home address 350 Kentucky Blud., Hazard: KY 41701 Title of public position, or office sought State Representative 84th
Other occupations of filer Mant. Phisings Swace
Occupations of spouse Mg. Business Dware
NOTE: The Following Sections Do Not Require Disclosure Of Specific Dollar Amounts.
Positions held by filer in any business, partnership, corporation for profit, or corporation
not for profit from which the filer receives compensation, and the name of the business,
partnership, or corporation ferry Bil Company - Management
Hazard Food Mart, Int - Vice President Divid Bonne Ipratopents LLC - Partner
Positions held by filer's spouse in any business, partnership, corporation for profit, or corporation not for profit from which the filer receives compensation, and the name of the business, partnership, or corporation for profit from which the filer receives compensation, and the name of the business, partnership, or corporation for profit, or corporation for profit, or corporation of the business, partnership, or corporation for profit, or corporation not for profit, or corporation not for profit, or corporation for profit, or corporation not for profit, or corporation not for profit from which the filer receives compensation, and the name of the business, partnership, or corporation for profit, or corporation for profit, or corporation for profit, or corporation for profit from which the filer receives compensation, and the name of the business, partnership, or corporation for profit from the filer receives compensation, and the name of the business, partnership, or corporation for file for file for files from the filer receives compensation, and the name of the business, partnership, or corporation for file file for file file for fil
Names and addresses of all businesses, investments, or securities in which the filer, filer's spouse, or filer's minor children had at any time during the reporting year an interest of \$10,000 at fair market value, or 5% ownership interest or more Hazard Food Mart Jac. Daniel Rosce Tourstments LLC 1057 Office Rox 1479 Hazard; K.Y. 41702

Sources and form of gross income of the filer (list sources by name) <u>Salary</u> — Percy 0:1 Company, Inc. — Hazard Food Mart, Inc.
Salary - Kentucky General Assembly
Morgan Kregan - Personal Investment Account
Sources and form of gross income of the filer's spouse (list sources by name) - ferry Oil Company + Hezard Food Mart. For - Salary Daniel Boane Investments, LLC - Withdrawal Distribution
Morgan Fergon - Personal Investment Account
Positions of a fiduciary nature in a business_N/A
A designation as commercial, residential, or rural, and the location of all real property other than the filer's primary residence, in which there is an interest of \$10,000 or more held by the filer, filer's spouse, or filer's minor children
Through Business Interest Previously Listed
Sources of gifts of money or property with a retail value of more than \$200 to the filer or the filer's immediate family, except those from a member of the filer's family. (Family means spouse, parent, sibling, child, mother-in-law, father-in-law, son-in-law, daughter-in-law, grandparent, or grandchild. Immediate family means unemancipated child residing in an individual's household, spouse, or a person claimed by the filer's spouse as a dependent for tax purposes.)
-N/H
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The name of any creditor owed more than \$10,000 except debts arising from the purchase
of consumer goods. (Goods used or bought for use primarily for personal, family, or
household purposes) Community Trust Bunk - Res idential Mode
GM AC - Airlo loan Community Tirst Auto Loan
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The name of any legislative agent who is:
1. A member of the filer's immediate family,
2. A partner of the filer, or a partner of a member of the filer's immediate family,
3. An officer or director of the filer's employer;
4. An employer of the filer or an employer of a member of the filer's immediate
family;
5. A business associate of the filer or a business associate of a member of the
filer's immediate family
11 1 M
N/H
The names of any of the filer's clients who are legislative agents or employers
_N'/#-
If you have held a professional license during the filing period, has a properly licensed
partner of yours engaged in the practice of cases or other matters which you are
prohibited from practicing under KRS 6.744? Yes No Not Applicable

If yes, list the names of the clients represented and list the agencies before which the partner made an appearance. The filer need not identify which client was represented before a specific agency.

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NOTICES

- 1. Upon receipt by the Commission, a statement of financial disclosure shall be a public record available for copying.
- 2. Any person who fails to file a statement of financial disclosure or who fails to remedy a deficiency identified by the Commission in a timely manner may be fined an amount not to exceed \$100 per day up to a maximum total fine of \$1000.
- 3. Any person who files a statement of financial interests which they know to contain false information, or to omit required information, shall be guilty of a class A misdemeanor.

02-15-2005 Date

Filer

Send completed statements to:

The Kentucky Legislative Ethics Commission

22 Mill Creek Park

Frankfort, Kentucky 40601

FAX (502) 573-2929

If you have questions please call us at (502) 573-2863.